

## **Involvement with companies as providing information or services: benefit or risk to babies, families and health workers?**

General questions to consider on any involvement related to information materials or services

- What is the benefit of this involvement/sponsorship to mothers and babies?
- What is the benefit to the hospital?
- What is the cost to the hospital? (clinical staff time, manager's time, storage etc)
- What is the benefit to the company from advertising and marketing through the hospital?
- Could the service be provided to an adequate level without this commercial involvement?
- Is it appropriate that a hospital service relies on commercial involvement to provide the service to patients?
- Is it appropriate that HSE services to patients comes with commercial marketing?
- Does the distribution of the commercial material imply the HSE (and BFHI) material is of lower value?
- Is handing out glossy written materials given higher value than discussing how the information applies to the individual family?

Use of a BFHI or HSE logo or text on commercial materials implies that the information comes from HSE / BFHI or the content is in some way approved by HSE / BFHI. Specific written permission is needed for use of HSE or BFHI logo.

It takes everyone's time to debate, review and monitor these commercial involvements with the main beneficiary of the health service time being the profit margins of the profit-making entity and probably resulting in less time available for assisting the mothers and babies by the health workers.

**It is a requirement of a Baby-friendly hospital that they abide fully by the International Code of Marketing of Breastmilk Substitutes and the related subsequent resolutions of the World Health Assembly. Failure to do so can result in loss of the award. It is recommended that hospitals aiming for the Baby-friendly award also abide by the Code.**

### **Paper materials: posters, leaflets, magazines and Web sites**

Info sheets are best used as a support or memory aid for what has been discussed with the health worker at the visit. Info sheets are not a substitute for time to discuss how the information relates to the individual mother and her situation.

All materials distributed (or web site links provided) to pregnant women, postnatal mothers or parents of infants and young children in the hospital and linked ante-natal/post-natal clinics should be regularly checked by knowledgeable hospital staff. Ideally materials would be checked in the pre-printing stage so changes could be made if needed.

Materials (including web sites) may give incorrect information or unwanted impressions through the articles, advertisements or illustrations. For example, photographs of breastfeeding should show good positioning and attachment, particularly a wide open mouth. Special foods or supplements are not needed to produce good quality mothers' milk. Breastfeeding should be phrased as the norm rather than a choice that some mothers might make. Baby-friendly practices should also be considered the norm, not by special request or as an optional practice. Reflect on the difference between phrasing breastfeeding as important and the standard and phrasing breastfeeding as a benefit "above the norm". For example, if breastfeeding babies have less risk of illness and better brain development, what is this less or better than?

Ensure that information given to antenatal women avoids confusion or unrealistic expectations with statements such as "A good support bra will help your breasts to return to normal." Pregnancy more so than breastfeeding affects breast shape and breasts normally do not return to the shape they were before the first pregnancy regardless of feeding method. This statement could imply that there is something abnormal about breasts that mature. Or "The first milk is less rich than breast milk, though it is of benefit to your baby ...". Colostrum is very rich and very important to an infant. This statement could imply that it is of low value. Checklists for hospital bag that state "if you plan to breastfeed" assumes this is the less likely choice. Watch for statements that imply breastfeeding mothers have extra needs such as "the extra energy required for breastfeeding." Breastfeeding is normal, not extra.

Ads for bottles, teats, pacifiers, formula of any type, teas or juices for infants in hospital distributed materials (or web links) give the impression that the hospital approves of or even encourages the use of these products. Generally the more expensive versions of products are what is advertised, which may result in parents spending more money than needed thinking this is recommended for their baby, thus reducing money for other needs. It is expected that these types of ads, or articles promoting these products do not appear in magazines that a Baby-friendly hospital makes available to pregnant women/mothers.

When distributing materials, consider if you are happy to give advertisements to parents that encourage them to contact the advertiser for further marketing such as a video marketing how the company's products are the solution to a long list of difficulties with breastfeeding, a catalogue of their products including bottles and teats, or a website marketing breastmilk substitutes. A disclaimer such as "this hospital believes that it is safe to use the products advertised in this magazine" is questionable when there are known risks from using bottles and teats and breast milk substitutes.

Materials may seem suitable on the surface but consider what is behind them. If a flyer advertises a free gift or vouchers merely for signing up to a web site then the company must think it will benefit financial from that sign-up. Commercial companies do not give gifts without expecting a return on their investment. Once the mother (or health worker) signs up to the web site or mailing programme they are deemed to have "requested information from the company" and under Irish law the company can send them product samples, gifts, invitations, marketing materials etc even if these activities are in breach of the International Code.

For some of the materials the hospital has a contract with the company and receives something in return for distribution of the materials. Ensure that the terms of the contract include there will be no advertising of products covered by the International Code (and subsequent resolutions) including breastmilk substitutes, bottles, teats, and soothers. In addition, that all materials will be given to a designated hospital person for through review and in sufficient time before printing to allow any changes if needed. When publications carry a HSE or hospital logo it implies that it is approved by someone in the HSE/hospital.

**Providing written material and avoiding commercial sponsorship**

- BFHI leaflets are widely used to support discussion: “Pregnancy is a good time to discuss...” and “Before you go home...” with “Considering formula feeding ...” used when relevant. All the other BFHI leaflets are supporting information that the woman could be directed to if she wants more information. Recent BFHI leaflets have QR codes (like a bar code) so that the info sheet can be on the wall and parents download their own copy with their smart phone ways
- Some hospitals laminate some sets of the BFHI info sheets, fasten them together and leave them in the antenatal and postnatal areas for parents to read while waiting.